

CLAIMS ONLY

SERIAL NO

FILING DATE

APPLICANT'S

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			★		★		★	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51						
2							52						
3							53						
4							54						
5							55						
6							56		9				
7							57		9				
8							58		9				
9							59		9				
10							60		9				
11							61		9				
12							62		9				
13							63		9				
14							64		9				
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18							68		9				
19							69		9				
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46							96						
47							97						
48							98						
49							99						
50							100						

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICANT'S

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			★		★		★	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51						
2							52						
3							53						
4							54						
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6							56						
7							57						
8							58						
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22							72						
23							73	1					
24							74		3				
25							75						
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50							100						